

AGING AND LONG-TERM SUPPORT ADMINISTRATION
RESIDENTIAL CARE SERVICES
"Transforming Lives"

CHAPTER 23 – CENTRAL FILES

CENTRAL FILES– OVERVIEW

This chapter contains information about what documents are stored in central files and the field offices. The content is relevant to RCS staff as well as anyone seeking to understand how RCS files are stored, retained and disclosed.

AUTHORITY

- a. [RCW 42.56.100](#)
- b. [DSHS Administrative Policy 5.04](#)
- c. [DSHS Administrative Policy 5.08](#)

SUBJECT MATTER EXPERTS

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23 – CENTRAL FILES

CENTRAL FILES

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6. Central Files inspections initiated *after* 1/1/2016 – Enhanced Service Facilities (ESF)
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7. Central Files Folder – CCRSS
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APPENDIX A: [CHANGE LOG](#)

23 A-1 SUBMITTING SURVEYS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – NH

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate survey documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the NF survey documentation to Central Files.

Procedure - to be applied for any survey that was initiated on or after 01/01/2016

A. Instructions for RCS Field Office:

1. Survey documentation is to be submitted to Central Files within 10 working days after the survey is considered closed. The survey is considered closed when all necessary ACO, AEM, and/or ACTS data entry has been completed and Back in Compliance letter has been signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. Survey documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed survey documentation to:
NF Central Files, MS: 45600

Documents	Source
1. CMS 1539	ACO
2. Room Waivers (if applicable)	
3. CMS 2567B	ACO
4. Post Survey WAC Sheet(s) (if applicable)	DSHS Form 10-207 and/or 10-206
5. CMS 2567 Send only the CMS 2567 that has both signatures and the associated POC (if a POC is required). If a POC is required, the only CMS 2567 sent to Central Files should be the CMS 2567 with both signatures and the official "received" dated POC.	ACO
6. CMS 2567A	ACO
7. WAC sheet(s) (if applicable)	DSHS Form 10-207 and/or 10-206
8. CMS 671	ACO
9. CMS 672	ACO
10. Correspondence and certified mail receipts, if applicable , in order, with the most current dated on the top. All original certified mail green receipt cards with the white receipt should be taped on a separate piece of blank paper and be placed behind the corresponding document. Examples of Correspondence: Initial, Back In Compliance letter, POC Not Acceptable letters, etc. Please do not send <u>photocopies</u> of the CMS 2567 or WAC sheets (i.e. a photocopy of what you sent the Provider). Send only the final version of the CMS 2567 (see above). Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the IDR and/or Compliance Unit.	DSHS and CMS

B. Instructions for RCS Headquarters (IDR, Compliance, NATCEP):

1. IDR/Enforcement/NATCEP documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files.

The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.

3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
<p>1. Correspondence and certified mail receipts in order with the most current dated document on the top.</p> <p>All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.</p>	TIVA and DSHS

Field Manager and HQ Program Manager Responsibility

A. Instructions for Field Managers and HQ Program Managers:

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-2 SUBMITTING SURVEYS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – ICF/IID

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Recertification Survey documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the ICF/IID Recertification Survey documentation to Central Files.

Procedure - to be applied for any recertification survey that was initiated on or after 01/01/2016

A. Instructions for RCS Field Office:

1. Recertification survey documentation is to be submitted to Central Files within 10 working days after the survey is considered closed. ICF/IID recertification surveys are considered closed upon final data entry case closure in ASPEN (ACO) and Back in Compliance letter is signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. Recertification survey documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed recertification survey documentation to:

ICF/IID Central Files, MS: 45600

Documents	Source
11. CMS 1539	ACO
12. CMS 2567B	ACO
13. Post Survey WAC Sheet(s) (if applicable)	DSHS Form 10-207 and/or 10-206
14. CMS 2567 Send only the CMS 2567 that has both signatures and the associated POC (if a POC is required). If a POC is required, the only CMS 2567 sent to Central Files should be the CMS 2567 with both signatures and the official "received" dated POC.	ACO
15. WAC sheet(s) (if applicable)	DSHS Form 10-207 and/or 10-206
16. CMS 3070G	ACO
17. Correspondence and certified mail receipts, if applicable , in order with the most current dated on the top. All original certified mail green receipt cards with the white receipt should be taped on a separate piece of blank paper and be placed behind the corresponding document. Examples of Correspondence: Initial, Back In Compliance, POC Not Acceptable letters, State SODs, etc. Please do not send <u>photocopies</u> of the CMS 2567 or WAC sheets (i.e. a photocopy of what you sent the Provider). Send only the final version of the CMS 2567 (see above). Please do not include copies of the IDR letters; Central Files receives them from the IDR Unit.	DSHS and CMS

B. Instructions for RCS Headquarters (IDR Unit):

1. IDR documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.

3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
<p>2. Correspondence and certified mail receipts in order with the most current dated document on the top.</p> <p>All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.</p>	TIVA and DSHS

Field Manager and HQ Program Manager Responsibility

A. Instructions for Field Managers and HQ Program Managers:

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-3 SUBMITTING INSPECTIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – AFH

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate inspection documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the AFH inspection documentation to Central Files.

Procedure – to be applied for any inspection that was initiated on or after 01/01/2016

A. Instructions for RCS Field Office:

1. Inspection documentation is to be submitted to Central Files within 10 working days of inspection closure. Inspections are considered closed when final entry is completed in FMS, POC dates are entered in FMS and Back in Compliance letter is signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. Inspection documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed inspection documentation to:
AFH Central Files, MS: 45600

Documents	Source
3. Follow-up SOD and POC Attestation, if applicable	FMS
4. SOD and POC Attestation, if applicable	FMS
5. Correspondence and certified mail receipts, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD cover letter, Back in Compliance letter, etc. Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the IDR and/or Compliance Unit.	FMS and DSHS

B. Instructions for RCS Headquarters (IDR, Compliance):

1. IDR/Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
1. Correspondence and certified mail receipts in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.	FMS, TIVA and DSHS

Field Manager and HQ Program Manager Responsibility

A. Instructions for Field Managers and HQ Program Managers:

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-4 SUBMITTING INSPECTIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – ALF

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate inspection documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the ALF inspection documentation to Central Files.

Procedure - to be applied for any inspection that was initiated on or after 01/01/2016

A. Instructions for RCS Field Office:

1. Inspection documentation is to be submitted to Central Files within 10 working days after the inspection is considered closed. Inspections are considered closed when final entry is completed in FMS, POC dates are entered in FMS and Back in Compliance letter is signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. Inspection documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed inspection documentation to:
ALF Central Files, MS: 45600

Documents	Source
6. Follow-up SOD and POC Attestation, if applicable	FMS

7. SOD and POC Attestation, if applicable	FMS
8. Correspondence and certified mail receipts, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD cover letter, Back in Compliance letter, Consultation Letter, etc. Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the IDR and/or Compliance Unit.	FMS and DSHS

B. Instructions for RCS Headquarters (IDR, Compliance):

1. IDR/Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
1. Correspondence and certified mail receipts in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.	TIVA and DSHS

Field Manager and HQ Program Manager Responsibility

A. Instructions for Field Managers and HQ Program Managers:

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.

4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-5 SUBMITTING CERTIFICATIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – CCRSS

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility/service provider records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

The Field Office must ensure appropriate Certification Evaluation documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the CCRSS Certification Evaluation documentation to Central Files.

Procedure - to be applied for any Certification Evaluation that was initiated on or after 01/01/2016

A. Instructions for RCS Field Office:

1. Certification Evaluation documentation is to be submitted to Central Files within 10 working days after the evaluation is considered closed. The Certification Evaluation is considered closed once the POC is approved (if no follow-up is necessary) or once follow-up occurs, the service provider is determined to be back in compliance and Back in Compliance letter is signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. Certification Evaluation documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed Certification Evaluation documentation to:

CCRSS Central Files, MS: 45600

Documents	Source
9. Follow-up SOD and POC, if applicable	WORD
10. SOD and POC	WORD
11. Correspondence and certified mail receipts, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD cover letter, Certification Letter, Back in Compliance letter, revisit investigation letters, etc. Please do not include copies of the Enforcement Letters; Central Files receives them from the Compliance Unit.	WORD, TIVA and DSHS

B. Instructions for RCS Headquarters (IDR, Compliance):

1. IDR/Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
1. Correspondence and certified mail receipts in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.	TIVA and DSHS

Field Manager and HQ Program Manager Responsibility

A. Instructions for Field Managers and HQ Program Managers:

1. Review new process with staff.

2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-6 SUBMITTING INSPECTIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – ESF

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate inspection documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the ESF inspection documentation to Central Files.

Procedure - to be applied for any inspection that was initiated on or after 01/01/2016

A. Instructions for RCS Field Office:

1. Inspection documentation is to be submitted to Central Files within 10 working days after the inspection is considered closed. Inspections are considered closed when final entry is made in FMS, POC dates are entered in FMS and Back in Compliance letter is signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. Inspection documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
4. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed inspection documentation to:
ESF Central Files, MS: 45600

Documents	Source
12. Follow-up SOD and POC, if applicable	FMS
13. SOD and POC	FMS
14. Correspondence and certified mail receipts, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD cover letter, Back in Compliance letter, revisit investigation letters, etc. Please do not include copies of the Enforcement Letters; Central Files receives them from the Compliance Unit.	FMS and DSHS

A. Instructions for RCS Headquarters (Compliance):

1. Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
1. Correspondence and certified mail receipts in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.	TIVA, FMS and DSHS

Field Manager and HQ Program Manager Responsibility

A. Instructions for Field Managers and HQ Program Manager:

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.

3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-7 SUBMITTING SURVEYS INITIATED PRIOR TO 1/1/2016 TO CENTRAL FILES – NH AND ICF/IID

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate survey documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the NF and ICF/IID survey documentation to Central Files.

Procedure – to be applied for any inspection that was initiated before 01/01/2016

A. Field Staff:

1. Send the original survey file/packet documents to: **NH Central Files, MS: 45600**
 - a. The survey file/packet must come to Central Files ready to be filed;
 - b. All copying, sorting, and separating must be completed before submitting the survey file/packet to Central Files;
 - c. Verify the Health Survey file/packet is complete with all of the correct documents, this may mean waiting for all documents to be completed;
 - d. Ensure all survey data is reconciled in ASPEN (ACO, AEM, and/or ACTS); and
 - e. The inspection packet must be submitted without staples. Rubber bands or clips can be used to hold the documents together.
 - f. If a facility provides or sends their original surety bond to a field office, please include that original documentation in the packet. Please do not send copies obtained during the Survey, those copies shall be retained in the working paper files.
2. Survey file/packet document order:
 - a. C&T (CMS 1539)
 - b. Room Waivers (if any)
 - c. Post Survey – CMS 2567B
 - d. Post Survey – CMS 670
 - e. Post Survey - WAC SHEETS (DSHS form 10-207)
 - f. Full Survey – CMS 2567
 - g. Full Survey - WAC SHEETS (DSHS form 10-207)
 - h. Full Survey – CMS 670

- i. Full Survey – CMS 671 (Intermediate Care Facilities have CMS 3070G instead of CMS 671)
- j. Full Survey – CMS 672 (Intermediate Care Facilities have CMS 3070G instead of CMS 672)
- k. Correspondence to include: Initial Letter, BIC letters etc.
- l. IDR correspondence/paperwork (if from facility only) in chronological order with the most current dated document on the top.

B. Compliance Office (Enforcement & IDR) Staff:

- 1. Correspondence relating to any Enforcement or IDR action in chronological order with most recent date on top of the packet
- 2. Certified Mail receipts should be taped to a separate sheet of paper
- 3. Office of Administrative Hearings documentation

C. Central Files Staff:

- 1. Survey file/packet document order:
 - a. C&T (CMS 1539)
 - b. Room Waivers (if any)
 - c. Post Survey – CMS 2567B
 - d. Post Survey – CMS 670
 - e. Post Survey – WAC SHEETS (DSHS forms 10-206 & 10-207)
 - f. Full Survey – CMS 2567
 - g. Full Survey - WAC SHEETS (DSHS forms 10-206 & 10-207)
 - h. Full Survey - CMS 670
- 2. Full Survey – CMS 671 (Intermediate Care Facilities have CMS 3070G instead of CMS 671)
 - a. Full Survey – CMS 672 (Intermediate Care Facilities have CMS 3070G instead of CMS 672)
 - b. LSC Survey - Initial/Cover Letter
 - c. LSC Survey - POC Unacceptable Letter (if applicable)
 - d. LSC Survey – CMS 2567B
 - e. LSC Survey – CMS 2567
 - f. LSC Survey – CMS 670

- g. LSC Survey – CMS 2786R
- h. LSC Survey - Crucial Data Extract(s) – CMS 2786E
- i. ENFORCEMENT CORRESPONDENCE - File in chronological order with the most current dated document on the top. This includes fining papers.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-8 SUBMITTING INSPECTIONS INITIATED PRIOR TO 1/1/2016 TO CENTRAL FILES – AFH

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate survey documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the AFH Inspection documentation to Central Files.

PROCEDURE – TO BE APPLIED FOR ANY INSPECTION THAT WAS INITIATED BEFORE 01/01/2016

A. Field Staff:

1. Send the original survey file/packet documents to: **AFH Central Files, MS: 45600**
 - a. The inspection file/packet must come to Central Files ready to be filed;
 - b. All copying, sorting, and separating must be completed before submitting the inspection file/packet to Central Files;
 - c. Verify the inspection file/packet is complete with all of the correct documents, this may mean waiting for all documents to be completed;
 - d. Ensure all inspection data is reconciled in FMS; and
 - e. The inspection packet must be submitted without staples. Rubber bands or clips can be used to hold the documents together.
2. Inspection packet document order:
 - a. SOD/POC Attestation
 - b. Correspondence to include: Initial Letter, BIC letters etc.
 - c. Certified Mail receipts should be taped to a separate sheet of paper
 - d. IDR correspondence/paperwork (if from facility only) in chronological order with the most current dated document on the top.

B. Compliance Office (Enforcement & IDR) Staff:

1. Correspondence relating to any Enforcement or IDR action in chronological order with most recent date on top of the packet
2. Certified Mail receipts should be taped to a separate sheet of paper
3. Office of Administrative Hearings documentation

C. Central Files Staff:

When inspection documents are received Central Files Staff will file them according to the instructions below:

1. Inspection File:

Section 1:

- a. SOD/POC Attestation

Section 2:

- a. Correspondence to include: Initial Letter, BIC letters etc. with Certified Mail receipts taped to a separate sheet of paper
- b. Correspondence Deficiency free or consultation letter only inspection

2. Enforcement & IDR File:

Section 2:

- a. Correspondence relating to any Enforcement action in chronological order with most recent date on top of the packet with Certified Mail receipts taped to a separate sheet of paper

Section 3:

- a. Correspondence relating to any IDR action in chronological order with most recent date on top of the packet with Certified Mail receipts taped to a separate sheet of paper
- b. IDR correspondence/paperwork (if from facility only) in chronological order with the most current dated document on the top.

Section 4:

- a. Office of Administrative Hearings documentation

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23A-9 SUBMITTING INSPECTIONS INITIATED PRIOR TO 1/1/2016 TO CENTRAL FILES – ALF

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate survey documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the ALF Inspection documentation to Central Files.

Procedure – to be applied for any inspection that was initiated before 01/01/2016

A. Field Staff:

1. Send the original survey file/packet documents to: **ALF Central Files, MS: 45600**
 - a. The inspection file/packet must come to Central Files ready to be filed;
 - b. All copying, sorting, and separating must be completed before submitting the inspection file/packet to Central Files;
 - c. Verify the inspection file/packet is complete with all of the correct documents, this may mean waiting for all documents to be completed;
 - d. Ensure all inspection data is reconciled in FMS; and
 - e. The inspection packet must be submitted without staples. Rubber bands or clips can be used to hold the documents together.
2. Inspection packet document order:
 - a. SOD/POC Attestation
 - b. Correspondence to include: Initial Letter, BIC letters etc.
 - c. Certified Mail receipts should be taped to a separate sheet of paper
 - d. IDR correspondence/paperwork (if from facility only) in chronological order with the most current dated document on the top.

B. Compliance Office (Enforcement & IDR) Staff:

1. Correspondence relating to any Enforcement or IDR action in chronological order with most recent date on top of the packet
2. Certified Mail receipts should be taped to a separate sheet of paper
3. Office of Administrative Hearings documentation

C. Central Files Staff:

When inspection documents are received Central Files Staff will file them according to the instructions below:

1. Inspection File:

Section 1:

- a. SOD/POC Attestation

Section 2:

- a. Correspondence to include: Initial Letter, BIC letters etc. with Certified Mail receipts taped to a separate sheet of paper
- b. Correspondence Deficiency free or consultation letter only inspection

2. Enforcement & IDR File:

Section 2:

- a. Correspondence relating to any Enforcement action in chronological order with most recent date on top of the packet with Certified Mail receipts taped to a separate sheet of paper

Section 3:

- a. Correspondence relating to any IDR action in chronological order with most recent date on top of the packet with Certified Mail receipts taped to a separate sheet of paper
- b. IDR correspondence/paperwork (if from facility only) in chronological order with the most current dated document on the top.

Section 4:

- a. Office of Administrative Hearings documentation

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B COMPLAINTS

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

23B1 SUBMITTING COMPLAINT INVESTIGATIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES - NF

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the NF Complaint Investigation documentation to Central Files.

Procedure – to be applied for any complaint investigation that was initiated on or after 01/01/2016

A. THE FIELD OFFICE

1. Complaint investigation documentation is to be submitted to Central Files within 10 working days after the case is considered closed. For cited cases the case is considered closed when all necessary ACO, AEM, and/or ACTS data entry has been completed.
2. Only signed original SOD/POCs should be sent to Central Files.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one packet should be sent to Central Files.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Complaint investigation documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
6. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to:

NF Central Files, MS: 45600.

Documents	Source
18. CMS 2567B (if applicable)	ACO
19. Post WAC Sheet(s) (if applicable)	DSHS Form 10-207
20. CMS 2567 (if applicable) Send only the CMS 2567 that has both signatures and the associated POC (if a POC is required). If a POC is required, the only CMS 2567 sent to Central Files should be the CMS 2567 with both signatures and the official “received” dated POC.	ACO
21. CMS 2567A	
22. WAC sheet(s) (if applicable)	DSHS Form 10-207
23. Correspondence and certified mail receipts, if applicable , in order, with the most current dated on the top. All original certified mail green receipt cards with the white receipt should be taped on a separate piece of blank paper and be placed behind the corresponding document. Examples of Correspondence: Initial, Back In Compliance letter, POC Not Acceptable letters, Public Outcome Letter, etc. Please do not send <u>photocopies</u> of the CMS 2567 or WAC sheets (i.e. a photocopy of what you sent the Provider). Send only the final version of the CMS 2567 (see above). Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the IDR and/or Compliance Unit.	DSHS and CMS

B. HEADQUARTERS (IDR / COMPLIANCE UNITS)

1. IDR/Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
<p>15. Correspondence and certified mail receipts in order with the most current dated document on the top.</p> <p>All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.</p>	TIVA and DSHS

C. FIELD MANAGERS AND HEADQUARTERS PROGRAM MANAGERS

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B2 SUBMITTING COMPLAINT INVESTIGATIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – ICF/IID

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the ICF/IID Complaint Investigation documentation to Central Files.

Procedure – to be applied for any complaint investigation that was initiated on or after 01/01/2016

A. THE FIELD OFFICE

1. Complaint investigation documentation is to be submitted to Central Files within 10 working days after the case is considered closed. ICF/IID Complaint Investigation which have resulted in citations are considered closed upon final data entry case closure in ASPEN (ACO).
2. Only signed original SOD/POCs should be sent to Central Files.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one packet should be sent to Central Files.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Complaint investigation documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
6. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to:

ICF/IID Central Files, MS: 45600

Documents	Source
1. CMS 2567B (if applicable)	ACO
2. Post WAC Sheet(s) (if applicable)	DSHS Form 10-207
3. CMS 2567 (if applicable) Send only the CMS 2567 that has both signatures and the associated POC (if a POC is required). If a POC is required, the only CMS 2567 sent to Central Files should be the CMS 2567 with both signatures and the official “received” dated POC.	ACO
4. WAC sheet(s) (if applicable)	DSHS Form 10-207
5. Correspondence and certified mail receipts, if applicable , in order with the most current dated on the top. All original certified mail green receipt cards with the white receipt should be taped on a separate piece of blank paper and be placed behind the corresponding document. Examples of Correspondence: Initial, Back In Compliance, POC Not Acceptable letters, Public Outcome Letter, etc. Please do not send <u>photocopies</u> of the CMS 2567 or WAC sheets (i.e. a photocopy of what you sent the Provider). Send only the final version of the CMS 2567 (see above). Please do not include copies of the IDR letters; Central Files receives them from the IDR Unit.	DSHS and CMS

B. HEADQUARTERS (IDR / COMPLIANCE UNITS)

1. IDR documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.

3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
<p>1. Correspondence and certified mail receipts in order with the most current dated document on the top.</p> <p>All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.</p>	TIVA and DSHS

C. FIELD MANAGERS AND HEADQUARTERS PROGRAM MANAGERS

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B3 SUBMITTING COMPLAINT INVESTIGATIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – AFH AND ALF

BACKGROUND

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the AFH or ALF Complaint Investigation documentation to Central Files.

Procedure – to be applied for any complaint investigation that was initiated on or after 01/01/2016

A. THE FIELD OFFICE

1. Inspection documentation is to be submitted to Central Files within 10 working days of inspection closure. Inspections are considered closed when final TIVA entry is made, POC dates are entered in FMS and Back in Compliance letter is signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one packet should be sent to Central Files.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Complaint investigation documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.

6. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to:

AFH or ALF Central Files, MS: 45600.

Documents	Source
16. Follow-up SOD and POC Attestation, if applicable	FMS
17. SOD and POC Attestation, if applicable	FMS
18. Consultation Letter, if applicable	FMS
19. Correspondence and certified mail receipts, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD cover letter, Consultation Letter, Back in Compliance letter, revisit investigation letters, Public Outcome Letter, etc. Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the IDR and/or Compliance Unit.	FMS and DSHS

B. HEADQUARTERS (IDR / COMPLIANCE UNITS)

1. IDR/Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
2. Correspondence and certified mail receipts in order with the most current dated document on the top.	FMS, TIVA and DSHS

All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.	
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C. FIELD MANAGERS AND HEADQUARTERS PROGRAM MANAGERS

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B4 SUBMITTING COMPLAINT INVESTIGATIONS INITIATED AFTER 1/1/2016 TO CENTRAL FILES – CCRSS

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the CCRSS Complaint Investigation documentation to Central Files.

Procedure – to be applied for any complaint investigation that was initiated on or after 01/01/2016

A. THE FIELD OFFICE

1. Complaint investigation documentation is to be submitted to Central Files within 10 working days after the case is considered closed. For CCRSS cited cases the case is considered closed once the POC is approved (if no follow-up is necessary) or once follow-up occurs and the facility is determined to be back in compliance.
2. Only signed original SOD/POCs should be sent to Central Files.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one packet should be sent to Central Files.
4. If a change was made to the SOD due to an IDR, please send the final signed IDR SOD and subsequent POC to Central Files.
5. Complaint investigation documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
6. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to:

CCRSS Central Files, MS: 45600

Documents	Source
1. Follow-up SOD and POC, if applicable	Word
2. SOD and POC, if applicable	Word
3. Correspondence and certified mail receipts, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate piece of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD Cover letter, Back in Compliance letter, revisit investigation letters, Public Outcome Letter, etc. Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the IDR and/or Compliance Unit.	Word, TIVA and DSHS

B. HEADQUARTERS (IDR / COMPLIANCE UNITS)

1. IDR/Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

C. FIELD MANAGERS AND HEADQUARTERS PROGRAM MANAGERS

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.
3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.

4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B5 SUBMITTING COMPLAINT INVESTIGATIONS TO CENTRAL FILES – ESF

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This standard operating procedure outlines the timeline, document type and process for providing the ESF complaint investigation documentation to Central Files.

Procedure – to be applied for any complaint investigation

A. THE FIELD OFFICE

1. Complaint investigation documentation is to be submitted to Central Files within 10 working days after the case is considered closed. ESF cited cases are considered closed when final TIVA entry is completed, POC dates are entered in FMS data and Back in Compliance letter is signed and sent to provider.
2. Only signed original SOD/POCs should be sent to Central Files.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one packet should be sent to Central Files.
4. Complaint investigation documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
5. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to:
ESF Central Files, MS: 45600

Documents	Source
1. Follow-up SOD and POC, if applicable	FMS
2. SOD and POC	FMS
3. Correspondence and certified mail receipts, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD cover letter, Back in Compliance letter, revisit investigation letters, Public Outcome Letter, etc. Please do not include copies of the Enforcement Letters; Central Files receives them from the Compliance Unit.	FMS and DSHS

B. HEADQUARTERS (IDR / COMPLIANCE UNITS)

1. Enforcement documentation is to be submitted to Central Files within 10 working days of determination.
2. Documentation must come to Central Files ready to be filed. All sorting and separating must be completed before submitting the packet to Central Files. The packet must be submitted without staples; rubber bands or clips can be used to hold the documents together.
3. Documents are to be sent to Central Files in the order as outlined in the table below.

Documents	Source
2. Correspondence and certified mail receipts in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.	TIVA, FMS and DSHS

C. FIELD MANAGERS AND HEADQUARTERS PROGRAM MANAGERS

1. Review new process with staff.
2. Train new staff and ensure they are able to demonstrate they understand this procedure.

3. Conduct periodic reviews of this procedure to ensure staff are following SOP correctly.
4. Request training or clarification from headquarters as needed.
5. Comply with requests from the Quality Assurance Unit when asked to provide documentation of the mandatory interview questions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B6 SUBMITTING COMPLAINT INVESTIGATIONS INITIATED BEFORE 1/1/2016 TO CENTRAL FILES – NH AND ICF/IID

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This SOP covers submission of complaints for NH and ICF/IID

Procedure – to be applied for any complaint investigation that was initiated before 01/01/2016

A. Instructions for RCS Field Office:

1. Complaint investigation documentation is to be submitted to central files when the follow-up investigation has been completed, the facility is back in compliance, and the necessary ACO, AEM, and/or ACTS data entry has been completed. Only signed original 2567s should be sent to Central Files.
2. If an IDR was conducted, at the conclusion of the IDR, attach a copy of the original Investigative Summary Report(s) to the front of the packet of modified documentation, with "IDR Final Documentation / Original SOD Dated MO / DAY / YEAR" written at the top of the page and highlighted.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one copy of the CMS 670 form, SOD/POC (if applicable), WAC sheets (if applicable) and related correspondence should be sent with the packet to central files. For packets with multiple complaints attach the Central Files Complaint Reference Sheet to the top of the packet.
4. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to: **NH or ICF/IID Central Files, MS: 45600**. Do not include the below checklist with the complaint packet.

Documents	Source
24. Investigative Summary Report(s) . For multiple complaints put the ISRs in order with highest TIVA Intake ID number on top.	TIVA
25. CMS 670 (Post Survey, if applicable)	ACO or ACTS

26. CMS 2567B (if applicable)	ACO
27. CMS 670 (Initial Survey)	ACO or ACTS
28. CMS 2567 (SOD and POC, if applicable)	ACO
29. Post WAC Sheet(s) (if applicable)	DSHS Form 10-207
30. Original WAC sheet(s) (if applicable)	DSHS Form 10-207
31. Correspondence (if applicable) in order, with the most current dated on the top. All original certified mail green receipt cards with the white receipt should be taped on a separate piece of blank paper and be placed behind the corresponding document. Examples of Correspondence: Initial, Back In Compliance, POC Not Acceptable letters, Public Outcome Letter, etc. Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the Compliance Office.	DSHS and CMS
20. Complaint Intake Form(s) . For multiple complaints put the Complaint Intake Forms in order with the highest TIVA Intake ID number on top.	TIVA

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B7 SUBMITTING COMPLAINT INVESTIGATIONS INITIATED BEFORE 1/1/2016 TO CENTRAL FILES – AFH AND ALF

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This SOP covers submission of complaints for ALF and AFH

Procedure – to be applied for any complaint investigation that was initiated before 01/01/2016

A. Instructions for RCS Field Office:

1. Complaint investigation documentation is to be submitted to Central Files when the follow-up investigation has been completed, the facility is back in compliance and the necessary FMS data entry has been completed. Only signed original SOD/POCs should be sent to Central Files.
2. If an IDR was conducted, at the conclusion of the IDR, attach a copy of the original Investigative Summary Report to the front of the packet of modified documentation, with “IDR Final Documentation / Original SOD Dated MO / DAY / YEAR” written at the top of the page and highlighted.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one copy of the SOD/POC (if applicable) and related correspondence should be sent with the packet to central files. For packets with multiple complaints attach the Central Files Complaint Reference Sheet to the top of the packet.
4. Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to: **AFH or ALF Central Files, MS: 45600**. Do not include the below checklist with the complaint packet.

Documents	Source
21. Investigative Summary Report(s) . For multiple complaints put the ISRs in chronological order with the highest TIVA Intake ID number on top.	TIVA
22. Copy of Follow-up SOD sent to the facility and original POC, if applicable	FMS
23. Copy of SOD sent to the facility and original POC, if applicable	FMS

<p>24. Correspondence, if applicable, in order with the most current dated document on the top.</p> <p>All original certified mail green receipt cards with the white receipt should be taped to a separate sheet of blank paper and placed behind the corresponding document.</p> <p>Examples of Correspondence: SOD cover letter, Back in Compliance letter, revisit investigation letters, Public Outcome Letter, etc.</p> <p>Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the Compliance Office.</p>	FMS and DSHS
<p>25. Complaint Intake Form(s). For multiple complaints put the Complaint Intake Forms in order with the highest TIVA Intake ID number on top.</p>	TIVA

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23B8 SUBMITTING COMPLAINT INVESTIGATIONS INITIATED BEFORE 1/1/2016 TO CENTRAL FILES – CCRSS

Background

RCS Central Files has the responsibility of providing access, management, retention, storage, protection, and disposition of RCS facility records throughout their life cycle and to ensure timely and accurate information is available on the Consumer Friendly Website.

Each Field Office must ensure appropriate Complaint Investigation documents are sent to Central Files in a timely and organized manner.

This SOP covers submission of complaints for CCRSS

Procedure – to be applied for any complaint investigation that was initiated before 01/01/2016

A. Instructions for RCS Field Office:

1. Complaint investigation documentation is to be submitted to Central Files when the follow-up investigation has been completed, the facility is back in compliance and the necessary FMS data entry has been completed. Only signed original SOD/POCs should be sent to Central Files.
2. If an IDR was conducted, at the conclusion of the IDR, attach a copy of the original Investigative Summary Report(s) to the front of the packet of modified documentation, with “IDR Final Documentation / Original SOD Dated MO / DAY / YEAR” written at the top of the page and highlighted.
3. If there were multiple complaints investigated on the same date and have the same exit date, only one copy of the SOD/POC (if applicable) and related correspondence should be sent with the packet to central files. For packets with multiple complaints attach the Central Files Complaint Reference Sheet to the top of the packet.

Documents	Source
26. Investigative Summary Report(s). For multiple complaints put the ISRs in order with the highest number TIVA Intake ID number on top.	TIVA
27. Copy of Follow-up SOD sent to the facility and original POC, if applicable	Word

28. Copy of SOD sent to the facility and original POC, if applicable	Word
29. Correspondence, if applicable , in order with the most current dated document on the top. All original certified mail green receipt cards with the white receipt should be taped to a separate piece of blank paper and placed behind the corresponding document. Examples of Correspondence: SOD Cover letter, Back in Compliance letter, revisit investigation letters, Public Outcome Letter, etc. Please do not include copies of the IDR or Enforcement Letters; Central Files receives them from the Compliance Office.	Word
30. Complaint Intake Form(s) . For multiple complaints put the Complaint Intake Forms in order with the highest TIVA Intake ID number on top.	TIVA

Documents are to be sent to Central Files in the order as outlined in the table below. Send completed complaint packet documentation to: **SL Central Files, MS: 45600**. Do not include the below checklist with the complaint packet.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23C ORGANIZATION AND MAINTENANCE OF RCS CENTRAL FILES AND FILES IN THE FIELD

BACKGROUND:

RCS has a centralized filing system in order to eliminate the need for field offices to house hard-copies of certain documentation. The RCS Central Files Filing Grids help provide better clarity to staff regarding what items need to be housed in Central Files.

23C1 CENTRAL FILE PROCEDURE NH AND ICF/IID LICENSING FILE

LICENSING FILE

Green Folder 4 sections; Total retention: 10 years post closure.

SECTION 1	SECTION 2	SECTION 3	SECTION 4
<ul style="list-style-type: none"> Licenses and related correspondence including license application, license renewal Payment statement and related correspondence Management agreements and related correspondence Closure Documentation – Place Green closure sticker on all folders belonging to the facility with the year that the facility closed 	<ul style="list-style-type: none"> Home information change and attachments including administrator and facility changes Facility staff changes 	This section is not used	This section is not used

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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Title 18/19 FILE

Green Folder 4 sections; Total retention: 10 years post closure.

SECTION 1	SECTION 2	SECTION 3	SECTION 4
<ul style="list-style-type: none"> CMS Form 1539 (Medicare/Medicaid Certification and Transmittal) This form is removed from the Full Health Survey to file separately (Usually the first page) 	<ul style="list-style-type: none"> Used for the same document when side one is full 	This section is not used	This section is not used

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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PERMANENT FILE

Manila Folder 2 sections; Total retention: 10 years post closure.

SECTION 1	SECTION 2
<ul style="list-style-type: none">• Medicaid contracts• Contract amendments• Contract correspondence• Background Checks	<ul style="list-style-type: none">• All correspondence regarding the physical building• DOH Construction Review Letter of Transmittal• Construction approvals• Lists of beds• OBRA/Nurse registry correspondence• Room waivers

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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ENFORCEMENT/IDR FILE (ENF/IDR)

Green Folder 4 sections; Keep 3 years beyond facility closure at Central Files; Total 60 years post closure retention

SECTION 1	SECTION 2	SECTION 3	SECTION 4
Enforcement activity log	<p>Enforcement related documents such as:</p> <ul style="list-style-type: none"> • Civil fines • Stop placement • Closure due to revocation, Summary Suspension or Voluntary Surrender (place green closure sticker with year on all folders) • Failure to pay • Late fee letter • NSF letter • Conditions Imposed/lifted on license • Denial of Medicaid Payment • CMS (Federal) Enforcement <p>(chronological order with newest on top)</p>	<p>Informal Dispute Resolution (IDR) Documents Such as:</p> <ul style="list-style-type: none"> • IDR requests • Scheduling IDR • IDR outcomes <p>(chronological order with newest on top)</p>	<ul style="list-style-type: none"> • Fair Hearings/Court related documents • Office of Administrative Hearing (OAH) documents <p>(chronological order with newest on top. If the date is unknown, use date of receipt by DSHS)</p>

*No copies of SODs should be in this folder.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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SURETY BOND FOLDER

Manila Folder 2 sections; Total retention: 10 years post closure.

SECTION 1	SECTION 2
This section is not used	<ul style="list-style-type: none">• Surety Bond Documents AKA Patient Trust Bonds

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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SURVEY FILE

By Year of Survey Manila folder 2 sections; Keep 3 years at Central Files; Total Retention- 7 years

SECTION 1	SECTION 2
<p>All forms on this side are to be place in the order below:</p> <ul style="list-style-type: none"> • Room Waivers (if any) • Post Survey – CMS 2567B • Post Survey – CMS 670 • Post Survey – WAC SHEETS (DSHS forms 10-206 & 10-207) • Full Survey – CMS 2567 • Full Survey - WAC SHEETS (DSHS forms 10-206 & 10-207) • Full Survey - CMS 670 c. Full Survey – CMS 671 (Intermediate Care Facilities have CMS 3070G instead of CMS 671) d. Full Survey – CMS 672 (Intermediate Care Facilities have CMS 3070G instead of CMS 672) e. LSC Survey - POC Unacceptable Letter (if applicable) f. LSC Survey – CMS 2567B g. LSC Survey – CMS 2567 h. LSC Survey – CMS 670 i. LSC Survey – CMS 2786R j. LSC Survey - Crucial Data Extract(s) – CMS 2786E <p>*If there is a Survey that includes a Complaint Investigation(s) a copy of the entire packet will need to be placed in both the Survey folder and the Complaint folder.</p>	<ul style="list-style-type: none"> • Initial/Cover Letter/Correspondence/letters from the surveys and within the survey packet. • CMS Correspondence • Survey summaries • Federal surveys (e.g. conducted by CMS)

*If there is more than one Full Health Survey is conducted in a calendar year, create a separate folder for each Survey.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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COMPLAINT FILE

By Year of Investigation Manila folder 2 sections; Keep 3 years at Central Files; Total Retention- 7 years

SECTION 1	SECTION 2
January through June- In order by intake number highest number on top.	July through December- In order by intake number highest number on top.
<ul style="list-style-type: none"> • Complaint Reference Sheet • Investigation Summary Report (ISR) • Statement of deficiencies CMS 2567(SODs)/POC if applicable • If there is a Survey that includes a Complaint Investigation(s) a copy of the entire packet will need to be placed in both the Survey folder and the Complaint folder. • Complaint Intake • Hardcopy Intake from the Complaint Resolution Unit (CRU) 	

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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CHOW FILE (Change of Ownership)

Green folder 4 sections; Total retention: 10 years post closure.

SECTION 1	SECTION 2	SECTION 3	SECTION 4
CHOW Application with all additional attachments / correspondence *Only original versions of the CHOW Application, no copies.	Section not used	Section not used	Carry over from section 1 if the documents exceed the size limitation of the folder.

If the documents exceed the size of the folder create additional Volumes to accommodate.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23C2 NURSING HOME & ICF/IID WORKING PAPER FILE

WORKING PAPER FILE

Working papers are to be kept in a separate “Working Paper” file. Each Unit/Region should determine the location of the working papers and ensure the Field Manager has access to them at all times. The working papers contain the following:

- ☐ The resident list from the inspection;
- ☐ All inspection documentation;
- ☐ Admission Agreement Attestation;
- ☐ Map/Directions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23C3 CENTRAL FILES PROCEDURE AFH LICENSING FILE

LICENSING FILE

Brown Folder; Keep 3 years beyond closure at Central Files; Total retention: 10 years post closure.
(chronological order with newest on top)

SECTION 1 History	SECTION 2 License Status	SECTION 3 Pre-2014 inspections	SECTION 4 Pre-2014 enforcement	SECTION 5 Pre-2014 IDR	SECTION 6 Miscellaneous
<ul style="list-style-type: none"> Change in Entity Representative Change in Resident Manager Geriatric Certification Packet 	<ul style="list-style-type: none"> All AFH Licenses and any documents that required issuance of that license (e.g. capacity change, specialties change (staple together as a packet) Current exemptions Exemption denied letter Expired exemptions Limits on a License 	<p>As of 2014 this section is not used.</p> <p>See Inspections Folder</p>	<p>As of 2014 this section is not used.</p> <p>See Enforcement/IDR (ENF/IDR) folder</p>	<p>As of 2014 this section is not used.</p> <p>See Enforcement/IDR (ENF/IDR) folder</p>	<ul style="list-style-type: none"> Annual fee check and/or coupon image

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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BUSINESS FILE

Green folder, 4 sections; Keep 3 years beyond closure at Central Files; Total retention: 10 years post closure.
Previous to 2012 this folder only had 2 sections.

SECTION 1	SECTION 2	SECTION 3	SECTION 4
<ul style="list-style-type: none"> • Current contract • New contract • Expired/pervious contract(s) • Contract termination memo and letter • Any attestations with contracts • Management agreements • Liability insurance • Information changes form: facility name change, add or terminate a contract, Phone/fax number, mailing, and email address changes. <ul style="list-style-type: none"> • Closure letters and closure forms (stapled together as a packet) – CHOW, Relocation or Voluntary Closure - (place green closure sticker with year on all folders) • Lease or rental agreements • Background Checks <p>(chronological order with newest on top)</p>	<p>This section is not used</p>	<p>This section is not used</p>	<ul style="list-style-type: none"> • Original application with all attachments pertaining to original application • Copy of check submitted with application • Correspondence requesting verification of UBI, EIN or FEIN • District/Unit change information form • Adult Family Home Disclosure of Service Form

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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ENFORCEMENT/IDR FILE (ENF/IDR)

Green folder 4 sections; Keep 3 years beyond facility closure at Central Files; Total 60 years post closure retention

SECTION 1	SECTION 2	SECTION 3	SECTION 4
Enforcement activity log	<p>Enforcement Documents, such as</p> <ul style="list-style-type: none"> • Civil fines • Stop placement • Closure due to Revocation, Summary Suspension or Voluntary Surrender (place green closure sticker with year on all folders) • Failure to pay annual fee letter • Non-sufficient funds (NSF) letter • Late fee letter • Conditions Imposed/lifted on a license <p>(chronological order with newest on top)</p>	<p>Informal Dispute Documents (IDR) Such as</p> <ul style="list-style-type: none"> • IDR requests • Scheduling IDR • IDR outcomes <p>(chronological order with newest on top)</p>	<p>Office of Administrative Hearings (OAH) Fair Hearings/Court related documents</p> <p>(chronological order with newest on top, if known. Can use date of receipt by DSHS)</p>

*No copies of SODs should be in this folder.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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INSPECTION FILE

By Year of Investigation Manila folder 2 sections; Keep 3 Years at Central Files; Total Retention- 7 years

SECTION 1	SECTION 2
<ul style="list-style-type: none"> • Statement of Deficiencies (SOD) Attestation Plan of Correction (POC) • Most recent inspection on top (if there are more than one inspection in any one calendar year) <p>*If there is an Inspection that includes a Complaint Investigation(s) a copy of the entire packet will need to be placed in both the Inspection folder and the Complaint folder.</p>	<ul style="list-style-type: none"> • Correspondence/letters from the inspection packet • Correspondence regarding Plan of Correction (POC) • Deficiency free letter only • Consultation letter only • Back in Compliance Letter (BIC)

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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COMPLAINT FILE

By Year of Investigation Manila folder 2 sections; Keep 3 Years at Central Files; Total Retention- 7 years

SECTION 1	SECTION 2
January through June- In order by intake number highest number on top.	July through December- In order by intake number highest number on top.
<ul style="list-style-type: none"> • Complaint Reference Sheet • Investigation Summary Report (ISR) • Statement of deficiencies if applicable • If there is an Inspection that includes a Complaint Investigation(s) a copy of the entire packet will need to be placed in both the Inspection folder and the Complaint folder. • Complaint Intake • Hardcopy Intake from the Complaint Resolution Unit (CRU) 	

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23C4 ADULT FAMILY HOME WORKING PAPER FILE**ADULT FAMILY HOME - WORKING PAPER FILE****WORKING PAPER FILE**

Working papers are to be kept in a separate “Working Paper” file. Each Unit/Region should determine the location of the working papers and ensure the Field Manager has access to them at all times. The working papers contain the following:

- ☐ The current summary report from the tracking system (taken from current inspection);
- ☐ The resident list from the inspection;
- ☐ All inspection documentation;
- ☐ Monitoring visit memos;
- ☐ Admission agreement attestation;
- ☐ Current contracts, if available; and
- ☐ Map/Directions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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**23C5 CENTRAL FILES PROCEDURE ASSISTED LIVING FACILITY LICENSING
FILES**

LICENSING FILE

Brown Folder; Keep 3 years beyond closure at Central Files; Total retention: 10 years post closure.
(chronological order with newest on top)

SECTION 1 History	SECTION 2 License Status	SECTION 3 Pre-2014 inspections	SECTION 4 Pre-2014 enforcement	SECTION 5 Pre-2014 IDR	SECTION 6 Miscellaneous
<ul style="list-style-type: none"> Change in administrator 	<ul style="list-style-type: none"> All Licenses and any documents that required issuance of that license e.g. capacity change, specialties change (staple together as a packet) Approval for facility training Notification Current exemptions Exemption denied letter Expired exemptions Limits on a License 	<p>As of 2014 this section is not used.</p> <p>See Inspections Folder</p>	<p>As of 2014 this section is not used.</p> <p>See Enforcement/IDR (ENF/IDR) folder</p>	<p>As of 2014 this section is not used.</p> <p>See Enforcement/IDR (ENF/IDR) folder</p>	<ul style="list-style-type: none"> Original approved room list Revised room list Annual fee check and/or coupon image Construction Review Services Project approval packet, usually from DOH

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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BUSINESS FILE

Green folder, 4 sections; Keep 3 years beyond closure at Central Files; Total retention: 10 years post closure.
Previous to 2012 this folder only had 2 sections.

SECTION 1	SECTION 2	SECTION 3	SECTION 4
<ul style="list-style-type: none"> • Current contract • New contract • Expired/pervious contract(s) • Contract termination memo and letter • Any attestations with contracts • Management agreements • Liability insurance • Information changes form: facility name change, add or terminate a contract, Phone/fax number, mailing, and email address changes. • Closure letters and closure forms (stapled together as a packet) – CHOW, Relocation or Voluntary Closure - (place green closure sticker with year on all folders) • Lease or rental agreements • Background Checks <p>(chronological order with newest on top)</p>	<p>This section is not used</p>	<p>This section is not used</p>	<ul style="list-style-type: none"> • Original application with all attachments pertaining to original application • Copy of check submitted with application • Correspondence requesting verification of UBI, EIN or FEIN • District/Unit change information form

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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ENFORCEMENT/IDR FILE (ENF/IDR)

Green folder 4 sections; Keep 3 years beyond facility closure at Central Files; Total 60 years post closure retention

SECTION 1	SECTION 2	SECTION 3	SECTION 4
Enforcement activity log	<p>Enforcement Documents, such as</p> <ul style="list-style-type: none"> • Civil fines • Stop placement • Closure due to Revocation, Summary Suspension or Voluntary Surrender (place green closure sticker with year on all folders) • Failure to pay annual fee letter • Non-sufficient funds (NSF) letter • Late fee letter • Conditions Imposed/lifted on a license <p>(chronological order with newest on top)</p>	<p>Informal Dispute Documents (IDR) Such as</p> <ul style="list-style-type: none"> • IDR requests • Scheduling IDR • IDR outcomes <p>(chronological order with newest on top)</p>	<p>Office of Administrative Hearings (OAH) Fair Hearings/Court related documents</p> <p>(chronological order with newest on top, if known. Can use date of receipt by DSHS)</p>

*No copies of SODs should be in this folder.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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INSPECTION FILE

By Year of Inspection Manila folder 2 sections; Keep 3 Years at Central Files; Total Retention- 7 years

SECTION 1	SECTION 2
<ul style="list-style-type: none"> • Statement of Deficiencies (SOD) Attestation Plan of Correction (POC) • Most recent inspection on top (if there are more than one inspection in any one calendar year) <p>*If there is an Inspection that includes a Complaint Investigation(s) a copy of the entire packet will need to be placed in both the Inspection folder and the Complaint folder.</p>	<ul style="list-style-type: none"> • Correspondence/letters from the inspection packet • Correspondence regarding Plan of Correction (POC) • Deficiency free letter only • Consultation letter only • Back in Compliance Letter (BIC)

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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COMPLAINT FILE

By Year of Investigation Manila folder 2 sections; Keep 3 Years at Central Files; Total Retention- 7 years

SECTION 1	SECTION 2
January through June-	July through December-
In order by intake number highest number on top.	In order by intake number highest number on top.
<ul style="list-style-type: none"> • Complaint Reference Sheet • Investigation Summary Report (ISR) • Statement of Deficiencies (SOD) Attestation Plan of Correction (POC), if applicable • If there is an Inspection that includes a Complaint Investigation(s) a copy of the entire packet will need to be placed in both the Inspection folder and the Complaint folder. • Complaint Intake • Hardcopy Intake from the Complaint Resolution Unit (CRU) 	

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23C6 ASSISTED LIVING FACILITY WORKING PAPERS

ASSISTED LIVING FACILITY - WORKING PAPER FILE

WORKING PAPER FILE

Working papers are to be kept in a separate “Working Paper” file. Each Unit/Region should determine the location of the working papers and ensure the Field Manager has access to them at all times. The working papers contain the following:

- ☐ The current summary report from the tracking system (taken from current inspection);
- ☐ The resident list from the inspection;
- ☐ All inspection documentation;
- ☐ Admission Agreement Attestation;
- ☐ Monitoring Visit Memos; and
- ☐ Map/Directions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23C7 CENTRAL FILES PROCEDURE CCRSS COMPLAINT FILE

COMPLAINT FILE

By Year of Investigation Manila folder 2 sections; Keep 3 Years at Central Files; Total Retention- 7 years

SECTION 1	SECTION 2
<p>January through June-</p> <p>In order by intake number highest number on top.</p>	<p>July through December-</p> <p>In order by intake number highest number on top.</p>
<ul style="list-style-type: none"> • Complaint Reference Sheet • Investigation Summary Report (ISR) • Statement of deficiencies if applicable • If there is an Inspection that includes a Complaint Investigation(s) a copy of the entire packet will need to be placed in both the Inspection folder and the Complaint folder. • Complaint Intake • Hardcopies from the Complaint Resolution Unit (CRU) 	

*Please note that there is a certification file for the Supported Living setting. Currently, only complaint packets for the Supported Living program are filed by Central Files staff.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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23C8 CCRSS WORKING PAPERS

SUPPORTED LIVING FACILITY - WORKING PAPER FILE

WORKING PAPER FILE

Working papers are to be kept in a separate “Working Paper” file. Each Unit/Region should determine the location of the working papers and ensure the Field Manager has access to them at all times. The working papers contain the following:

- ☐ The resident list from the inspection;
- ☐ All inspection documentation;
- ☐ Monitoring Visit Memos; and
- ☐ Map/Directions.

Quality Assurance Review

Instructions for Quality Assurance Review Staff:

The Quality Assurance unit will review these procedures on a 24-month basis for accuracy, compliance and to identify any systemic issues. A report will be provided to RCS.

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APPENDIX A – PUBLIC DISCLOSURE AND CENTRAL FILES CHANGE LOG

Note to the public – Management Bulletins (MBs) are stored on the ALTSA intranet and cannot be accessed by the public

EFFECTIVE DATE	CHAPTER SECT #	WHAT CHANGED? BRIEF DESCRIPTION	REASON FOR CHANGE?	COMMUNICATION & TRAINING PLAN
4/2004	23 All	Public Disclosure Guidelines were updated.		MB issued: R04-027
3/2016	23 All	SOPs for documents sent to Central Files. Previously, info was in MBs.	Process has been streamlined and fewer documents required.	MB issued: June 29, 2016 Posted on-line for employee review and comment. In-person Support Staff Training held in June 2016.

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